

Fill in this information to identify the case:

Debtor name New England Confectionery Company, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) 18-11217

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 18, 2018

X /s/ Michael McGee Thomas Barnes

Signature of individual signing on behalf of debtor

Michael McGee Thomas Barnes

Printed name

President & CEO Chief Financial Officer

Position or relationship to debtor

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 United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**
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Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AAK USA INC MANAGING AGENT P.O. BOX 200029 PITTSBURGH, PA 15251-0029		Trade Debt subject to settlement discussions	Contingent Unliquidated Disputed			\$261,920.33
ACAS, LLC 245 Park Avenue New York, NY 10167		All assets - NOTE: ACAS, LLC F/K/A American Capital, LTD., Successor by merger with American Capital Financial Services, Inc.	Contingent Unliquidated Disputed	\$102,105,563.00	\$23,482,975.30	\$78,622,587.70
ACAS, LLC 245 PARK AVE. 44TH FLOOR New York, NY 10167		Estimated unpaid management fees	Unliquidated			\$788,954.00
AMERICRAFT CARTON, INC. 7400 State Line Road Suite 206 Prairie, KS 66208		Trade Debt				\$505,954.35
ATLANTIC - REVERE REALTY LLC C/O ATLANTIC MANAGEMENT CORP 205 NEWBURY ST FRAMINGHAM, MA 01701		Trade Debt				\$276,287.75

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if known) **18-11217**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
BURDETTE BECKMANN MANAGING AGENT 5851 JOHNSON STREET HOLLYWOOD, FL 33021		Trade Debt				\$419,565.38
CARGILL INC MANAGING AGENT PO BOX 415927 BOSTON, MA 02241-8954		Trade Debt				\$352,019.44
GENERAL CONVERTING INC MANAGING AGENT PO BOX 88460 Chicago, IL 60680		Trade Debt				\$524,377.07
GENPRO MANAGING AGENT 201 NJ-17 #400 Rutherford, NJ 07070		Trade Debt				\$475,008.50
NATIONAL GRID MANAGING AGENT PO BOX 11737 NEWARK, NJ 07101-4737		Trade Debt				\$312,792.24
NECCO REALTY MA I 2 BETHESDA METRO CENTER 14TH FLOOR Bethesda, MD 20814		Uncollected rent prior to current lease				\$33,774,826.78
NEW ENGLAND MOTOR FREIGHT MANAGING AGENT 1-71 North Avenue East Elizabeth, NJ 07201		Trade Debt				\$514,922.76
NEW ENGLAND WOODEN WARE CORP. MANAGING AGENT 205 SCHOOL STREET STE 201 GARDNER, MA 01440-2781		Trade Debt				\$602,837.07

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if known) **18-11217**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
NORTH CENTRAL COMPANIES MANAGING AGENT 601 CARLSON PARKWAY #400 MINNETONKA, MN 55305		Trade Debt	Contingent Unliquidated Disputed Subject to Setoff			\$261,269.67
SHANGHAI HANCHANG PRINTING c/o Ungermans Packaging Solutions 1699 Highway #1 Fairfield, IA 52556		Trade Debt				\$532,278.50
TEAM EXPRESS INC 40 Strafello Dr Avon, MA 02322		Trade Debt				\$166,225.00
TRANSMAR COMMODITY GROUP MANAGING AGENT 200 SOUTH ST MORRISTOWN, NJ 07960		Trade Debt	Disputed			\$294,847.34
UNICORR PACKAGING GROUP MANAGING AGENT 4282 PAYSHERE CIRCLE CHICAGO, IL 60674		Trade Debt				\$248,799.46
UNITED COCOA PROCESSOR, INC. MANAGING AGENT PO BOX 21064 NEW YORK, NY 10087-1064		Trade Debt				\$370,502.37
UNITED SUGAR CORP. MANAGING AGENT SDS 12-0548 P.O. BOX 86 MINNEAPOLIS, MN 55486		Trade Debt				\$159,599.27

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United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

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☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 23,482,975.30
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 23,482,975.30

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 102,140,671.60
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 36,312.57
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 45,117,357.77
4. Total liabilities Lines 2 + 3a + 3b	\$ 147,294,341.94

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$18.78

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Eastern Bank 195 Market Street, Lynn, MA 01901

Checking Account

9219

\$0.00

3.2. Eastern Bank 195 Market Street, Lynn, MA 01901

Lock Box Account

9227

\$222,357.35

3.3. Eastern Bank 195 Market Street, Lynn, MA 01901

Payroll Account

7907

\$5,020.45

3.4. WSFS Bank 500 Delaware Avenue, Wilmington, DE 19801

Checking Account

0428

\$238,915.19

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$466,311.77

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

Debtor New England Confectionery Company, Inc.
Name

Case number (If known) 18-11217

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. Deposit held by landlord ATLANTIC - REVERE REALTY LLC \$3,000,000.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

8.1. Prepaid Insurance - First Insurance \$48,702.91

8.2. Prepaid Insurance - MEMIC \$2,662.20

8.3. Prepaid Insurance - Wright Flood \$522.81

8.4. Prepaid Computer Maintenance - 1 WorldSync Inc Data Pool Services - July 2017-June 2018 \$1,312.50

8.5. Prepaid Computer Maintenance - Network Solutions NECCO.COM website- 3/1/2018 - 2/28/2019 \$41.66

8.6. Prepaid Computer Maintenance - Threattrack Security Inc. VIPRE Antivirus Business Subscription -3/24/18-3/23/19 \$1,063.90

8.7. Prepaid Computer Maintenance - Golden Touch Computer Solutions Phone support- 10/1/2017 - 9/30/2018 \$600.00

8.8. Prepaid - Rabbinical Council of N.E. Annual Kosher Certification - 8/1/17-7/31/18 \$720.00

8.9. Prepaid Advance to Supplier - AARON EQUIPMENT CO \$6,300.00

8.10. Prepaid Advance to Supplier - BERLIN PACKAGING \$89,146.34

8.11. Prepaid Advance to Supplier - BPM INC \$22,690.25

Debtor New England Confectionery Company, Inc. Case number (If known) 18-11217

Name

8.12
Prepaid Advance to Supplier - CATANIA - SPAGNA CORP \$40,200.00

8.13
Prepaid Advance to Supplier - DYNAMIC PACKAGING \$60,243.30

8.14
Prepaid Advance to Supplier - EASTERN INDUSTRIAL AUTOMATION \$1,433.01

8.15
Prepaid Advance to Supplier - FRANKLIN BAKER INC \$190.00

8.16
Prepaid Advance to Supplier - GENERAL PACKAGING PRODUCTS \$15,205.00

8.17
Prepaid Advance to Supplier - GILLCO PRODUCTS INC \$6,028.75

8.18
Prepaid Advance to Supplier - HLEKS GIDA SANAYI VE \$308.00

8.19
Prepaid Advance to Supplier - JLS AUTOMATION \$5,546.12

8.20
Prepaid Advance to Supplier - NORTH CENTRAL COMPANIES \$43,700.00

8.21
Prepaid Advance to Supplier - TRICO CORPORATION \$40,788.60

8.22
Prepaid Advance to Supplier - TRICOR SYSTEMS INC. \$1,262.52

8.23
Prepaid Advance to Supplier - UNIVAR USA, INC. \$2,413.92

8.24
Prepaid Advance to Supplier - VAN DRUNEN FARMS \$156.69

8.25
Prepaid Advance to Supplier - VARICK ENTERPRISES, INC. \$1,376.89

Debtor New England Confectionery Company, Inc.
Name

Case number (If known) 18-11217

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$3,392,615.37

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 6,276,220.00 - 627,622.00 = \$5,648,598.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 170,041.00 - 85,020.50 = \$85,020.50
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$5,733,618.50

Part 4: Investments

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

14. **Mutual funds or publicly traded stocks not included in Part 1**
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**
Name of entity: % of ownership

15.1. 4 Units of Candy Marketing Coalition, LLC % N/A Unknown

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description

Date of the last physical inventory

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

19. **Raw materials**

Debtor New England Confectionery Company, Inc. Case number (If known) 18-11217

Name

Raw Materials	4/30/2017	\$4,244,500.00	Book value	\$4,244,500.00
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20. Work in progress WIP	4/30/2017	\$1,597,126.13	Book value	\$1,594,126.13
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21. Finished goods, including goods held for resale Finished Goods	4/30/2017	\$4,319,863.89	Book value	\$4,319,863.89
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22. Other inventory or supplies

23. Total of Part 5. Add lines 19 through 22. Copy the total to line 84.	\$10,158,490.02
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24. Is any of the property listed in Part 5 perishable?

☐ No

☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☐ No

☒ Yes. Book value 349301.88 Valuation method Cost Current Value 349301.88

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Office Equipment, Computers, and Furniture with an original cost of \$344,370.98 and Accumulated Depreciation of \$281,041.22 and Net Book Value of \$63,329.76.	\$63,329.76	Book value	\$63,329.76

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

Debtor **New England Confectionery Company, Inc.**

Case number (If known) **18-11217**

Name

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$63,329.76

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. **2 New Yale NDR030EB Deep Reach * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017**
1 New Yale NDR030EB Deep Reach * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017
1 New Yale ERP030VT 3-Wheel SD CB * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017
1 New Yale MPE060 Rider Pallet Jack * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017
1 New Yale MPE060 Rider Pallet Jack * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017
4 New Yale MPB045VG Walk Behind PJ * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017

\$0.00

Unknown

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

Debtor **New England Confectionery Company, Inc.**

Case number (If known) **18-11217**

Name

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**
Machinery & Equipment with an original cost of \$12,658,238.17 and Accumulated Depreciation of \$9,024,085.03 and Net Book Value of \$3,634,152.14.

\$3,634,153.14	Book value	\$3,634,153.14
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51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$3,634,153.14

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☐ No
☒ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 135 American Legion Highway, Revere, Massachusetts, which contains 706,338 rentable square feet.	Leasehold Interest	Unknown		Unknown

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.

Debtor New England Confectionery Company, Inc.
Name

Case number (If known) 18-11217

■ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	<p>Patents, copyrights, trademarks, and trade secrets</p> <p>United States of America Registered trademark reg. no. 178,993</p> <p>United States of America Registered trademark reg. no. 1,439,372</p> <p>United States of America Registered trademark reg. no. 4,534,891</p> <p>United States of America Registered trademark reg. no. 525,887</p> <p>United States of America Registered trademark reg. no. 72,495</p> <p>United States of America Registered trademark reg. no. 3,930,281</p> <p>United States of America Registered trademark reg. no. 3,930,282</p> <p>United States of America Registered trademark reg. no. 2,195,932</p> <p>United States of America Registered trademark reg. no. 72,494</p> <p>Canada Registered trademark reg. no. TMA237,624</p> <p>United States of America Registered trademark reg. no. 1,001,117</p> <p>United States of America Registered trademark reg. no. 3,980,348</p> <p>United States of America Registered trademark reg. no. 1,470,821</p> <p>United States of America Registered trademark reg. no. 3,967,021</p> <p>United States of America Registered trademark reg. no. 95,225</p> <p>Canada Registered trademark reg. no. TMA368,099</p> <p>Canada Registered trademark reg. no. NFLD1060</p> <p>United States of America Registered trademark reg. no. 1,393,466</p> <p>United States of America Allowed trademark app. no. 87/150,393</p> <p>United States of America Registered trademark reg. no. 1,382,579</p> <p>United States of America Registered trademark reg. no. 2,101,335</p>			
		Unknown	N/A	Unknown

Debtor New England Confectionery Company, Inc.
Name

Case number (If known) 18-11217

United States of America Registered
trademark reg. no. 5070004
United States of America Allowed trademark
app. no. 87/150,402
United States of America Allowed trademark
app. no. 87/150,400
United States of America Allowed trademark
app. no. 87/150,403
United States of America Registered
trademark reg. no. 0,049,295
Canada Registered trademark reg. no. TMA
581,150
United States of America Registered
trademark reg. no. 721,683
United States of America Registered
trademark reg. no. 3,988,322
United States of America Registered
trademark reg. no. 2,853,275
United States of America Registered
trademark reg. no. 1,251,252
United States of America Registered
trademark reg. no. 3,926,236
United States of America Registered
trademark reg. no. 35,212
United States of America Registered
trademark reg. no. 4,165,557
Canada Registered trademark reg. no.
TMA165,610
United States of America Registered
trademark reg. no. 355,165
United States of America Registered
trademark reg. no. 2,937,572
United States of America Registered
trademark reg. no. 2,259,589
United States of America Registered
trademark reg. no. 3,270,829
United States of America Registered
trademark reg. no. 2,172,266

Unknown N/A

Unknown

61. Internet domain names and websites
www.necco.com

\$0.00

Unknown

62. Licenses, franchises, and royalties
Milk and Cream - License to sell milk or cream
in the cafeteria, which expires annually in May.
Permit Number:1211
Issuing Agency: City of Revere
Expiry Date: May 2018

\$0.00

Unknown

Debtor New England Confectionery Company, Inc.
Name

Case number (If known) 18-11217

Air permit - Conditional permit (no termination date) which on an annual basis Seller sends the updated information to continue permit coverage; this permit covers all of the factor's emissions (i.e. NOS, CO, Particulate Matter ("PM"), generated primary from engines, boilers and kitchen exhaust).

Permit Number: W024578

Issuing Agency: Commonwealth of Massachusetts, Department of Environmental Protection

Expiry Date: June 2018

\$0.00

Unknown

Massachusetts license verifies that the Seller is an approved Vendor for the state (annual renewal, last updated Summer 2017);

Permit Number: 621

Issuing Agency: Commonwealth of Massachusetts, Department of Safety

Expiry Date: June 2018

\$0.00

Unknown

State commerce - verifies cross state border approval (annual renewal, last updated Summer 2017);

Permit Number: MA- 1942

Issuing Agency: Commonwealth of Massachusetts, Food Protection Program

Expiry Date: May 2018

\$0.00

Unknown

Revere Board of Health - food commission license for the cafeteria

Permit Number: 2633

Issuing Agency: City of Revere

Expiry Date: May 31, 2018

\$0.00

Unknown

Elevator Certificate of Inspection - Each elevator has a certificate for use (weight); requires annual permits, where there are various dates of renewal (6 in total - 4 elevators and 2 lifts); most expire in May 2018.

Permit Number: INS-074025

Issuing Agency: Commonwealth of Massachusetts, Department of Public Safety; State ID: 248-P-117

Expiry Date: May 31, 2018

\$0.00

Unknown

Fire Inspection (Certificate of Occupancy) - Every quarter, testing is completed, which was taken over by the Landlord in 2017 (1 per fire alarm equity; 2 per sprinklers).

Permit Number: 05582308 08170

Issuing Agency : Simplex / City of Revere

Expiry Date: September 2018

\$0.00

Unknown

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

Debtor New England Confectionery Company, Inc. Case number (If known) 18-11217
Name

ISO New England Co-generation revenue rights

\$0.00

Unknown

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No

☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

Current value of debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

Net Operating Loss Carryforwards for U.S. federal tax purposes estimated value \$53,390,000.00.

Tax year **2016**

Unknown

Net Operating Loss Carryforwards for state tax purposes estimated value \$71,569,000.00.

Tax year **2016**

Unknown

73. **Interests in insurance policies or annuities**

Debtor New England Confectionery Company, Inc.

Name

Case number (If known) 18-11217

Starr Indemnity & Liability Company Renewal 17-18
General Liability Policy 1000305008171 Eff 12/21/2017
Great Northern Insurance Company Renewal 17-18
Foreign Package Policy 3588-90-31 Eff 12/21/2017
Federal Insurance Company Renewal 17-18 Crime
Policy 8234-5906 Eff 12/21/2017
Arch Specialty Insurance Company New Policy 17-18
Flood Policy ESP7304166-00 Eff 12/21/2017
Westchester Fire Insurance Company Renewal 17-18
Directors and Officers Policy G24363533-005 Eff
12/21/2017
XL Specialty Insurance Company Renewal 17-18
Products Recall Policy ICI701326 Eff 12/21/2017
The Hanover Insurance Company Renewal 17-18
Property Policy M004662-17 Eff 12/21/2017
RSUI Indemnity Company Renewal 17-18 EX Umbrella
\$25M x \$25M Policy NHA081639 Eff 12/21/2017
Starr Indemnity & Liability Company Renewal 17-18
Auto Policy SISIPCA08316617 Eff 12/21/2017
Travelers Property Casualty Company of America
Renewal 17-18 Lead Umbrella Policy
ZUP-15S68181-17-NF Eff 12/21/2017

Unknown

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims
DD FOCUSED SALES SOLUTIONS debit value accounts payable

\$208.09

Nature of claim

Amount requested

\$0.00

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*
Unclaimed Property claim #:4490880STATE OF WASHINGTON 1996MS08: 15 - Accounts Payable
Property ID: 1832409

\$379.00

Unclaimed Property claim #:4490880MASS ELECTRIC COMPANY DBA NATIONAL GRID USA SERVICE COMPANY INC2007CK13: 17 - Vendor ChecksProperty ID: 8932782

\$26,225.00

Unclaimed Property claim #:4487069Santander Bank2014AC01-01: Checking accounts/NOW accountsProperty ID: 17139258

\$7,644.65

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$34,456.74

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No

Debtor New England Confectionery Company, Inc. Case number (If known) 18-11217
Name

☐ Yes

Debtor **New England Confectionery Company, Inc.**
Name

Case number (If known) **18-11217**

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$466,311.77	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$3,392,615.37	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$5,733,618.50	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$10,158,490.02	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$63,329.76	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$3,634,153.14	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$34,456.74	
91. Total. Add lines 80 through 90 for each column	\$23,482,975.30	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$23,482,975.30

Fill in this information to identify the case:

Debtor name **New England Confectionery Company, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) **18-11217**

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<p>ACAS, LLC Creditor's Name</p> <p>245 Park Avenue New York, NY 10167 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred August 8, 2008 Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien All assets - NOTE: ACAS, LLC F/K/A American Capital, LTD., Successor by merger with American Capital Financial Services, Inc.</p> <p>Describe the lien Term Notes and Revolving Line of Credit Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	\$102,105,563.00	\$23,482,975.30
2.2	<p>HYG Financial Services Inc. Creditor's Name</p> <p>300 E. John Carpenter Freeway Irving, TX 75062-2712 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p>	<p>Describe debtor's property that is subject to a lien 2 New Yale NDR030EB Deep Reach * All options include new HUP battery and Impaq Chargers subject to Forklift Master Lease Agreement dated 1/18/2017 1 New Yale NDR030EB Deep Reach * All options include new HUP battery and Impaq Chargers subj</p> <p>Describe the lien Equipment Lease Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p>	\$26,901.69	Unknown

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if know) **18-11217**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.3 KRAFT POWER CORP

Creditor's Name

**199 WILDWOOD AVENUE
PO BOX 2189
WOBURN, MA 01888-0389**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Co-generation plant assets

\$8,206.91

Unknown

Describe the lien

Mechanic's Lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$102,140,671
.60**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **New England Confectionery Company, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) **18-11217**

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address
***NOTE regarding employee claims**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Pursuant to the Court's Order (I) Authorizing Payment of Certain Existing Employee Claims, including Wages and Salaries, (II) Authorizing Payment of Certain Employee Benefits and Confirming Right to Continue Employee Benefits on a Post-

Is the claim subject to offset?

- ☒ No
☐ Yes

Total claim	Priority amount
\$0.00	\$0.00

2.2 Priority creditor's name and mailing address
***NOTE regarding employee claims (cont.)**

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Petition Basis, (III) Authorizing Payment of Reimbursement to Employees for Existing Expenses, (IV) Authorizing Payment of Withholding and Payroll-Related Taxes, (V) Authorizing Payment of Existing Claims Owed to Administrators and Third-

Is the claim subject to offset?

- ☒ No
☐ Yes

\$0.00	\$0.00
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Debtor	Name	Case number (if known)	18-11217
2.3	Priority creditor's name and mailing address *NOTE regarding employee claims (cont.2)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: Party Providers, and (VI) Directing Banks to Honor Existing Checks and Fund Transfers for Authorized Payments, dated April 19, 2018 [Docket #64], all pre-petition wages, benefits, and reimbursements due to employees and all associated	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address *NOTE regarding employee claims (cont.3)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: expenses authorized therein have been paid by the Debtor on or about April 20, 2018. To the knowledge of the Debtor, no such claims remain outstanding as of the date hereof.	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address AETNA - MIDDLETOWN ALIC PO BOX 88860 CHICAGO, IL 60695-1860	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: employee benefit plan	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address Bakery, Confectionary & Tobacco 1 Pleasant St Framingham, MA 01701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00 \$0.00
	Date or dates debt was incurred	Basis for the claim: BCT Dental & Vision	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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2.7	Priority creditor's name and mailing address BLUE CROSS & BLUE SHIELD OF MASSACHUSETTS INC BOX 371318 PITTSBURGH, PA 15250-7318	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee Health Insurance Benefits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address COMMONWEALTH OF MASSACHUSETTS MASS DEPT. OF REVENUE P.O. BOX 7089 CHELSEA, MA 02204-7089	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$34,887.08	\$34,887.08
	Date or dates debt was incurred	Basis for the claim: Taxes owed		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address COMMONWEALTH OF MASSACHUSETTS MASS DEPARTMENT OF REVENUE PO BOX 7009 Boston, MA 02204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,425.49	\$1,425.49
	Date or dates debt was incurred	Basis for the claim: Use tax		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address DELTA DENTAL PLAN OF MASS INC 465 Medford St Charlestown, MA 02129-1454	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: Employee Dental Benefits		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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2.11	Priority creditor's name and mailing address IAM Pension PO Box 791129 Baltimore, MD 21279-1129	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: IAM Pension		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Internal Revenue Service Special Procedures P.O. Box 9112 JFK Building - Stop 20800 Boston, MA 02203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim: Taxes owed		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address International Association of Machinists 1300 Connecticut Ave, NW Suite 300 Washington, DC 20036-1711	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: IAM Medical Benefits		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address IUOE LOCL 877 BENEFIT FUNDS 89 ACCESS ROAD UNIT 4 NORWOOD, MA 02062	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim: IUOE Medical		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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2.15	Priority creditor's name and mailing address MA Dept. of Revenue Attn: John L. Giamattei Bankruptcy Unit P.O. Box 9564 Boston, MA 02114-9564	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes owed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address MASSACHUSETTS DEPT. OF REVENUE PO BOX 7089 BOSTON, MA 02204-7089	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes owed Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address MASSACHUSETTS VSP PO BOX 742479 LOS ANGELES, CA 90074-2479	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: employee benefit plan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address NATIONAL I.A.M. BENEFIT TRUST FUND PO BOX 64607 BALTIMORE, MD 21264-4607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: I.A.M. benefit plan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

<p>2.19 Priority creditor's name and mailing address</p> <p>TREASURER, STATE OF OHIO OHIO DEPARTMENT OF TAXATION PO BOX 16678 Columbus, OH 43216-6678</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Taxes owed</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Unknown</p> <p>Unknown</p>
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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<p>3.1 Nonpriority creditor's name and mailing address</p> <p>A. M. TODD COMPANY ATTN: ACCOUNTS PAYABLE 1717 DOUGLAS AVENUE KALAMAZOO, MI 49007</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$9,825.00</p>
<p>3.2 Nonpriority creditor's name and mailing address</p> <p>A.R. ARENA PRODUCTS, INC. 2101 MT. READ BLVD. ROCHESTER, NY 14615</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,588.72</p>
<p>3.3 Nonpriority creditor's name and mailing address</p> <p>AAK USA INC MANAGING AGENT P.O. BOX 200029 PITTSBURGH, PA 15251-0029</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt subject to settlement discussions</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$261,920.33</p>
<p>3.4 Nonpriority creditor's name and mailing address</p> <p>ABB INC 1460 LIVINGSTON AVENUE NORTH BRUNSWICK, NJ 08902</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$55,062.16</p>
<p>3.5 Nonpriority creditor's name and mailing address</p> <p>ABBOTT CONSTRUCTION & LANDSCAPING LLC PO BOX 99 BOXFORD, MA 01921</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,192.50</p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.6	Nonpriority creditor's name and mailing address ACAS, LLC 245 PARK AVE. 44TH FLOOR New York, NY 10167 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Estimated unpaid management fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$788,954.00
<hr/>			
3.7	Nonpriority creditor's name and mailing address ACCUTECH 157 GREEN STREET FOXBORO, MA 02035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,130.64
<hr/>			
3.8	Nonpriority creditor's name and mailing address ACTION BEARING PO BOX 99 BOSTON, MA 02134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,856.11
<hr/>			
3.9	Nonpriority creditor's name and mailing address ACTION MARKETING INC PO BOX 23808 CHATTANOOGA, TN 37422-3808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$979.39
<hr/>			
3.10	Nonpriority creditor's name and mailing address ACTION SALES WEST INC 24007 VEBTURA BLVA SUITE 120 CALABASAS, CA 91302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,916.41
<hr/>			
3.11	Nonpriority creditor's name and mailing address AIR INDUSTRIES, INC. 200 SUTTON ST. STE. 230 N. ANDOVER, MA 01845 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,212.86
<hr/>			
3.12	Nonpriority creditor's name and mailing address ALADDIN PACKAGING LLC 115 ENGINEERS ROAD HAUPPAUGE, NY 11788 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,201.71

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.13	<p>Nonpriority creditor's name and mailing address ALFA LAVAL THERMAL INC. PO BOX 951565 DALLAS, TX 75395-1565</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$6,004.07</p>
3.14	<p>Nonpriority creditor's name and mailing address ALL INDUSTRIAL CHEM PO BOS 3173 HALLANDALE, FL 33008</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$869.87</p>
3.15	<p>Nonpriority creditor's name and mailing address ALLIED ELECTRONICS CORP. 7151 JACK NEWELL BLVD. SO. P. O. BOX 2325 FORT WORTH, TX 76113</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$769.50</p>
3.16	<p>Nonpriority creditor's name and mailing address AMCON DISTRIBUTING ATTN JULIE RUTHER 7405 IRVINGTON ROAD OMAHA, NE 68122</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,250.00</p>
3.17	<p>Nonpriority creditor's name and mailing address AMERICAN EXPRESS PO BOX 1270 NEWARK, NJ 07101-1270</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,520.90</p>
3.18	<p>Nonpriority creditor's name and mailing address AMERICAN GAS PRODUCTS 24 VINE STREET EVERETT, MA 02149-4514</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$303.88</p>
3.19	<p>Nonpriority creditor's name and mailing address AMERICAN GELATIN CO PO BOX 286 BINGHAMTON, NY 13903</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$30,000.00</p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.20	<p>Nonpriority creditor's name and mailing address</p> <p>AMERICAN HOLT CORP. 203 CARNEGIE ROW NORWOOD, MA 02062</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,306.42</p>
<hr/>			
3.21	<p>Nonpriority creditor's name and mailing address</p> <p>AMERICAN PACKAGING CORP PO BOX 62527 BALTIMORE, MD 21264-2527</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$33,173.91</p>
<hr/>			
3.22	<p>Nonpriority creditor's name and mailing address</p> <p>AMERICAN REFRIGERATION CO INC 149 RIVER STREET SUITE 3 ANDOVER, MA 01810</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$6,072.58</p>
<hr/>			
3.23	<p>Nonpriority creditor's name and mailing address</p> <p>AMERICRAFT CARTON, INC. 7400 State Line Road Suite 206 Prairie, KS 66208</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$505,954.35</p>
<hr/>			
3.24	<p>Nonpriority creditor's name and mailing address</p> <p>AMMAR'S INC C/O AB WHOLESALE CO 710 SOUTH COLLEGE AVE BLUEFIELD, VA 24605-1639</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$250.00</p>
<hr/>			
3.25	<p>Nonpriority creditor's name and mailing address</p> <p>AMP ROSE (A M PACKAGING LTD) SOMERBY WAY GAINSBOROUGH LINCOLNSHIRE DN211QT ENGLAND</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$12,743.50</p>
<hr/>			
3.26	<p>Nonpriority creditor's name and mailing address</p> <p>ARAMARK PO BOX 28050 NEW YORK, NY 10087-8050</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$46,142.46</p>

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.27	<p>Nonpriority creditor's name and mailing address ARCHER DANIELS MIDLAND COM PO BOX 92572 CHICAGO, IL 60675-2572</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$4,205.82</p>
3.28	<p>Nonpriority creditor's name and mailing address ARCHPOINT SALES TEXAS 140 HEIMER ROAD SUITE 200 SAN ANTONIO, TX 78232</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$10,991.50</p>
3.29	<p>Nonpriority creditor's name and mailing address ARGUS MANAGEMENT CORPORATION 15 KEITH HILL ROAD SUITE 100 GRAFTON, MA 01519</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$18,972.55</p>
3.30	<p>Nonpriority creditor's name and mailing address ARIPACK INC 1007 SHEFFIELD AVE BROOKLYN, NY 11207</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$82,796.47</p>
3.31	<p>Nonpriority creditor's name and mailing address ARNOLD WORLDWIDE LLC PO BOX 845518 BOSTON, MA 02284-5518</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Unknown</p>
3.32	<p>Nonpriority creditor's name and mailing address AROMATECH FOOD FLAVOURS 5770 HOFFNER AVENUE SUITE 103 ORLANDO, FL 32822</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$22,016.88</p>
3.33	<p>Nonpriority creditor's name and mailing address ARROW PAPER CORPORATION 228 ANDOVER STREET WILMINGTON, MA 01887</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,768.79</p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**
Name

3.34	Nonpriority creditor's name and mailing address ASTRO CHEMICALS INC PO BOX 2248 SPRINGFIELD, MA 01102-2248 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,010.00
3.35	Nonpriority creditor's name and mailing address ATLANTIC - REVERE REALTY LLC C/O ATLANTIC MANAGEMENT CORP 205 NEWBURY ST FRAMINGHAM, MA 01701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$276,287.75
3.36	Nonpriority creditor's name and mailing address ATLANTIC MILLWRIGHTS INC. 77 CONCORD STREET NORTH READING, MA 01864-2601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,755.00
3.37	Nonpriority creditor's name and mailing address ATLANTIC SWEETENERS CO. PO BOX 1146 HAMMONTON, NJ 08037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,631.25
3.38	Nonpriority creditor's name and mailing address BARCLAY WATER MANAGEMENT, INC. 55 CHAPEL ST NEWTON, MA 02458 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,232.45
3.39	Nonpriority creditor's name and mailing address Barnes, Thomas 2861 Darby's Run Tarpon Springs, FL 34688 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.40	Nonpriority creditor's name and mailing address BARRY CALLEBAUT USA LLC MANAGING AGENT LOCKBOX 28543 28543 NETWORK PLACE CHICAGO, IL 60673-1285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$116,028.10

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

Name

3.41	Nonpriority creditor's name and mailing address BAY STATE PALLET CO., INC. 125 WARD HILL AVENUE HAVERHILL, MA 01835 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,002.40
3.42	Nonpriority creditor's name and mailing address BECK FLAVORS 212 MILLWELL DRIVE SUITE A MARYLAND HEIGHTS, MO 63043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,959.00
3.43	Nonpriority creditor's name and mailing address BELL FLAVORS & FRAGRANCE, INC 9104 PAYSHERE CIRCLE CHICAGO, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,988.88
3.44	Nonpriority creditor's name and mailing address BIRDSONG PEANUTS MANAGING AGENT P.O. BOX 1400 SUFFOLK, VA 23439 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129,866.00
3.45	Nonpriority creditor's name and mailing address BLACKFORD BROKERAGE PO BOX 7629 SHAWNEE MISSION, KS 66207 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,570.99
3.46	Nonpriority creditor's name and mailing address BLUEGRASS DAIRY AND FOOD INC 606 WEST MAIN STREET SPRINGFIELD, KY 40069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,037.28
3.47	Nonpriority creditor's name and mailing address BROOKS PEANUT COMPANY MANAGING AGENT P. O. BOX 733623 DALLAS, TX 75373-1524 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$141,284.00

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217
Name

3.48 Nonpriority creditor's name and mailing address **BUNZL ENGLAND 10-100
12765 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693** As of the petition filing date, the claim is: *Check all that apply.* **\$1,713.60**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.49 Nonpriority creditor's name and mailing address **BURDETTE BECKMANN
MANAGING AGENT
5851 JOHNSON STREET
HOLLYWOOD, FL 33021** As of the petition filing date, the claim is: *Check all that apply.* **\$419,565.38**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.50 Nonpriority creditor's name and mailing address **C & C SCALE CO., INC
107 ROCKY MEADOW STREET
MIDDLEBORO, MA 02346** As of the petition filing date, the claim is: *Check all that apply.* **\$610.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.51 Nonpriority creditor's name and mailing address **C J IRWIN COMPANY INC
4498 MAIN STREET
SUITE 16
BUFFALO, NY 14226-3826** As of the petition filing date, the claim is: *Check all that apply.* **\$21,887.50**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.52 Nonpriority creditor's name and mailing address **CAMBRIDGE PUBLIC HEALTH COMMIS
PO BOX 847438
BOSTON, MA 02284-7438** As of the petition filing date, the claim is: *Check all that apply.* **\$8,410.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.53 Nonpriority creditor's name and mailing address **CANDY MARKETING COALITION
C/O PROMOTION IN MOTION INC
ATTN: JOSH SHAPIRO
25 COMMERCE DRIVE
ALLENDALE, NJ 07401** As of the petition filing date, the claim is: *Check all that apply.* **\$8,750.00**
☒ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Prepayment
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

3.54 Nonpriority creditor's name and mailing address **CANON SOLUTIONS AMERICA
15004 COLLECTIONS CENTER DR
CHICAGO, IL 60693** As of the petition filing date, the claim is: *Check all that apply.* **\$1,202.03**
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred Basis for the claim: Trade Debt
Last 4 digits of account number Is the claim subject to offset? ☒ No ☐ Yes

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.55	<p>Nonpriority creditor's name and mailing address</p> <p>CAPOL LLC 707 LAKE COOK ROAD SUITE 320 DEERFIELD, IL 60015</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$49,056.00</u></p>
<hr/>			
3.56	<p>Nonpriority creditor's name and mailing address</p> <p>CARAUSTAR INDUSTRIES PO BOX 935010 ATLANTA, GA 31193-5010</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$149.92</u></p>
<hr/>			
3.57	<p>Nonpriority creditor's name and mailing address</p> <p>CARGILL INC MANAGING AGENT PO BOX 415927 BOSTON, MA 02241-8954</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$352,019.44</u></p>
<hr/>			
3.58	<p>Nonpriority creditor's name and mailing address</p> <p>CARLE & MONTANARI, USA 625-107 HUTTON STREET RALEIGH, NC 27606</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,971.00</u></p>
<hr/>			
3.59	<p>Nonpriority creditor's name and mailing address</p> <p>CARLIN O'BRIEN MANAGING AGENT 1851 HOWARD ST - M ELK GROVE, IL 60007</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$154,571.34</u></p>
<hr/>			
3.60	<p>Nonpriority creditor's name and mailing address</p> <p>CARLIN O'BRIEN CINCINNATI LLC 8500 BROADWELL ROAD CINCINNATI, IL 45255</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,500.00</u></p>
<hr/>			
3.61	<p>Nonpriority creditor's name and mailing address</p> <p>CASELLA WASTE SYSTEMS PO BOX 1383 WILLISTON, VT 05495</p> <p>Date(s) debt was incurred <u> </u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,993.75</u></p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.62	<p>Nonpriority creditor's name and mailing address CASSIDY WATER CONDITIONING INC 39 CHELMSFORD STREET LOWELL, MA 01851</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$140.00
3.63	<p>Nonpriority creditor's name and mailing address CITRUS AND ALLIED ESSENCES LTD PO BOX 28930 NEW YORK, NY 28930</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,490.71
3.64	<p>Nonpriority creditor's name and mailing address CITY OF REVERE 281 Broadway Revere, MA 02151-5027</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.65	<p>Nonpriority creditor's name and mailing address CLEAN HARBORS ENVIRONMENTAL SERVICES INC 42 LONGWATER DRIVE NORWELL, MA 02061</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,078.50
3.66	<p>Nonpriority creditor's name and mailing address CLEMATIS MACHINE & FIXTURE CO. 42 CLEMATIS AVE WALTHAM, MA 02154</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,696.00
3.67	<p>Nonpriority creditor's name and mailing address CMD CORP. P O BOX 1170 MILWAUKEE, WI 53201</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$735.52
3.68	<p>Nonpriority creditor's name and mailing address CO SALES (S CAL) 13245 RIVERSIDE DRIVE SUITE 540 SHERMAN OAKS, CA 91423</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,735.21

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if known) **18-11217**

3.69	Nonpriority creditor's name and mailing address CO-SALES (AZ) CENTRAL PARK FOREST 2700 N THIRD STREET SUITE 1000 PHOENIX, AZ 85004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$895.61
3.70	Nonpriority creditor's name and mailing address CO-SALES NORTHERN CALIFORNIA 7133 KOLL CENTER PARKWAY SUITE 200 PLEASANTON, CA 94566 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,350.86
3.71	Nonpriority creditor's name and mailing address COMAX MANUFACTURING dba Comax Flavors 130 BAYLIS RD MELVILLE, NY 11747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,475.16
3.72	Nonpriority creditor's name and mailing address COMM OF MASS DEPT OF FIRE SAFETY PO BOX 1025 - STATE RD ATTN: STEVEN ROURKE Stow, MA 01775 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Inspection/Fire Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.73	Nonpriority creditor's name and mailing address Commonwealth Corporation 2 Oliver Street 5th Floor Attn: Kim Bryson Boston, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Workforce Training Fund Program Grant #60021</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,225.00
3.74	Nonpriority creditor's name and mailing address COMMONWEALTH OF MASSACHUSETTS DEPT OF INDUSTRIAL ACCIDENTS PO BOX 3732 Boston, MA 02241-3732 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Industrial Accidents Fine</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.75	Nonpriority creditor's name and mailing address COMPRESSOR ENERGY SERVICE 395 DANIEL WEBSTER HWY #1 MERRIMACK, NH 03054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,500.00

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.76	<p>Nonpriority creditor's name and mailing address</p> <p>COYOTE LOGISTICS 2545 W. Diversey Ave. 3rd Floor Chicago, IL 60647</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$15,600.00</u>
3.77	<p>Nonpriority creditor's name and mailing address</p> <p>CROWN COFFEE SERVICE INC PO BOX 244 WAKEFIELD, MA 01880</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$518.19</u>
3.78	<p>Nonpriority creditor's name and mailing address</p> <p>CROWN LIFT TRUCKS PO BOX 641173 CINCINNATI, OH 45264-1173</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$4,675.04</u>
3.79	<p>Nonpriority creditor's name and mailing address</p> <p>CUSTOMIZED ENERGY SOLUTIONS 1528 WALNUT STREET 22ND FLOOR PHILADELPHIA, PA 19102</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$51,278.12</u>
3.80	<p>Nonpriority creditor's name and mailing address</p> <p>CYBERGRAPHICS BRYCE CORPORATION LLC PO BOX 18338 MEMPHIS, TN 38181-0338</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$12,917.00</u>
3.81	<p>Nonpriority creditor's name and mailing address</p> <p>DAIRY FARMERS OF AMERICA 2637 Collection Center Drive Chicago, IL 60693</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$50.00</u>
3.82	<p>Nonpriority creditor's name and mailing address</p> <p>DALTON ELECTRIC HEATING CO INC 28 HAYWARD STREET IPSWICH, MA 01938</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$242.50</u>

Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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3.83	Nonpriority creditor's name and mailing address DATA COUNCIL INC PO BOXZ 970066 BOSTON, MA 02297-0066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
<hr/>			
3.84	Nonpriority creditor's name and mailing address DAVEN CORP. 300 OAK STREET SUITE 730 PEMBROKE, MA 02359 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.85	Nonpriority creditor's name and mailing address DAVID R GOLDENBERG ONE TEAM ADVISORS 1117 SUNSET AVENUE JENKINTOWN, PA 19046 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,674.11
<hr/>			
3.86	Nonpriority creditor's name and mailing address DEL-VAL FOOD INGREDIENTS 3001 IRWIN ROAD SUITE A MT LAUREL, NJ 08054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,996.05
<hr/>			
3.87	Nonpriority creditor's name and mailing address DELANDE SUPPLY CO INC 58 PULASKI STREET PO BOX 707 PEABODY, MA 01960-7707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,364.33
<hr/>			
3.88	Nonpriority creditor's name and mailing address DENNIS K BURKE INC PO BOX 3639 BOSTON, MA 02241-3639 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$613.81
<hr/>			
3.89	Nonpriority creditor's name and mailing address DILLION BOILER SERVICES CO INC 380 CRAWFORD STREET FITCHBURG, MA 01420 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,657.00

Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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3.90	Nonpriority creditor's name and mailing address DING-A-LING ANSWERING SERVICE PO BOX 187 SPARTA, TN 38583 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$169.11
3.91	Nonpriority creditor's name and mailing address DIPERSIO, TONY 14 Wildwood Rd. Tewksbury, MA 01876 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.92	Nonpriority creditor's name and mailing address DOMINO AMJET, INC. 3809 COLLECTION CENTER DR CHICAGO, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,369.60
3.93	Nonpriority creditor's name and mailing address DSG SOLUTIONS, LLC 20 MONADNOCK ST. GARDNER, MA 01440 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,086.62
3.94	Nonpriority creditor's name and mailing address DYNAMIC PACKAGING MANAGING AGENT 1567 39TH STREET BROOKLYN, NY 11218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$144,463.15
3.95	Nonpriority creditor's name and mailing address E.A. BERG & SONS MANAGING AGENT 75 WEST CENTURY ROAD PARAMUS, NJ 07652 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$157,354.44
3.96	Nonpriority creditor's name and mailing address EAST COAST FILTER, INC. 686 SOUTH STREET SUITE 7B WRENTHAM, MA 02093 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,685.34

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.97	Nonpriority creditor's name and mailing address EASTERN PACKAGING INC. 283 LOWELL ST. LAWRENCE, MA 01840-1032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,989.90
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3.98	Nonpriority creditor's name and mailing address easyDNS TECHNOLOGIES INC ATTENTION: BILLING DEPARTMENT 300A - 219 DUFFERIN STREET TORONTO ON M6K3J1 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.25
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3.99	Nonpriority creditor's name and mailing address ECOLAB CENTER PO BOX 32027 NEW YORK, NY 10087-2027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,305.18
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3.100	Nonpriority creditor's name and mailing address ECOPLAST 4619 SURF AVENUE BROOKLYN, NY 11224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,276.75
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3.101	Nonpriority creditor's name and mailing address ECRM 27070 Miles Road Suite A Solon, OH 44139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102	Nonpriority creditor's name and mailing address EMSUR MEXICO, S.A. DE CV AV. DEMLAS FUENTES 78 PARQUE INDUSTRIAL FINSA QUERETARO MEXICO 76246 MEXICO Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,100.00
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3.103	Nonpriority creditor's name and mailing address ESHA RESEARCH PO BOX 13028 SALEM, OR 97309-1028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,999.00
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Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

Name

3.104	<p>Nonpriority creditor's name and mailing address</p> <p>ESSEX GRAIN PRODUCT INC. PO BOX 824208 PHILADELPHIA, PA 19182-4208</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$39,718.75</p>
3.105	<p>Nonpriority creditor's name and mailing address</p> <p>EUROPEAN AUTOMATION UNIT 3 PARKER COURT STAFFORD TECHNOLOGY PARK STAFFORDSHIRE UK ST18 OWP ENGLAND</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,103.76</p>
3.106	<p>Nonpriority creditor's name and mailing address</p> <p>EXHIBIT SOURCE INC 17035 S WALLACE AVENUE SOUTH HOLLAND, IL 60473</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$563.39</p>
3.107	<p>Nonpriority creditor's name and mailing address</p> <p>EXPERT LASER SERVICES, INC. P. O. BOX 744 SOUTHBRIDGE, MA 01550</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$4,045.08</p>
3.108	<p>Nonpriority creditor's name and mailing address</p> <p>FAMILY DOLLAR STORES PO Box 742706 Atlanta, GA 30374-2706</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Customer refund due</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,346.20</p>
3.109	<p>Nonpriority creditor's name and mailing address</p> <p>FASTEC SERVICES CO. PO BOX 14112 CHARLESTON, SC 29422</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,290.00</p>
3.110	<p>Nonpriority creditor's name and mailing address</p> <p>FASTENAL CO. P.O. BOX 1286 WINONA, MN 55987-0978</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,526.40</p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.111	<p>Nonpriority creditor's name and mailing address</p> <p>FEDERAL EXPRESS CORP PO BOX 371461 PITTSBURGH, PA 15250-7461</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$11,842.47
3.112	<p>Nonpriority creditor's name and mailing address</p> <p>FIRST ELECTRIC MOTOR SERVICE INC. 73 OLYMPIA AVENUE WOBURN, MA 01801</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$330.00
3.113	<p>Nonpriority creditor's name and mailing address</p> <p>FLAVORCHEM CORP 1525 BROOK DR DOWNES GROVE, IL 60515</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,656.58
3.114	<p>Nonpriority creditor's name and mailing address</p> <p>FLEXOGRAPHIC PRINTING PLATE CO 33 ARCTIC STREET WORCESTER, MA 01604</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,815.61
3.115	<p>Nonpriority creditor's name and mailing address</p> <p>FONA INTERNATIONAL INC. PO BOX 71333 CHICAGO, IL 60694-1333</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$17,600.43
3.116	<p>Nonpriority creditor's name and mailing address</p> <p>FOOD INGREDIENT SOLUTIONS, LLC 10 MALCOLM AVENUE UNIT 1 TETERBORO, NJ 07608</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,325.32
3.117	<p>Nonpriority creditor's name and mailing address</p> <p>FOODAROM 4343 VIEWRIDGE AVENUE SUITE B SAN DIEGO, CA 92123</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$18,875.00

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**
Name

3.118 Nonpriority creditor's name and mailing address **FREEMAN**
PO BOX 650036
DALLAS, TX 75265-0036
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$5,270.39**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.119 Nonpriority creditor's name and mailing address **FRUTAROM USA INC**
PO BOX 841921
BOSTON, MA 02284-1921
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$29,423.50**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.120 Nonpriority creditor's name and mailing address **GENALCO INC**
333 RESERVOIR ST.
NEEDHAM HTS., MA 02494
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$3,891.17**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.121 Nonpriority creditor's name and mailing address **GENERAL CONVERTING INC**
MANAGING AGENT
PO BOX 88460
Chicago, IL 60680
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$524,377.07**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.122 Nonpriority creditor's name and mailing address **GENPRO**
MANAGING AGENT
201 NJ-17 #400
Rutherford, NJ 07070
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$475,008.50**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.123 Nonpriority creditor's name and mailing address **GLOBAL EQUIPMENT COMPANY**
29833 NETWORK PLACE
CHICAGO, IL 60673-1298
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$203.95**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.124 Nonpriority creditor's name and mailing address **GODWIN ASSOCIATES**
5963 BRYN BROOKE DR
RALEIGH, NC 27614
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$8,529.56**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.125	Nonpriority creditor's name and mailing address GRAINGER DEPT 881139448 PALATINE, IL 60038-0001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,618.33
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3.126	Nonpriority creditor's name and mailing address GRAYBAR ELECTRIC COMPANY, INC. PO BOX 414426 BOSTON, MA 02241-4426 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$377.62
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3.127	Nonpriority creditor's name and mailing address GUMIX INTERNATIONAL 2160 NORTH CENTRAL RD FORT LEE, NJ 07024-7552 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,179.99
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3.128	Nonpriority creditor's name and mailing address H E BUTT GROCERY CO PO Box 202531 Dallas, TX 75320-2531 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer refund due</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,812.01
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3.129	Nonpriority creditor's name and mailing address H P HOOD INC. P.O. BOX 4060 BOSTON, MA 02211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,003.15
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3.130	Nonpriority creditor's name and mailing address HALLEY ELEVATOR CO 11 TYNG STREET NEWBURYPORT, MA 01950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,565.44
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3.131	Nonpriority creditor's name and mailing address Handel, Mary 2907 Dumbarton St NW Washington, DC 20007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**
Name

3.132 Nonpriority creditor's name and mailing address **HANSON, RICHARD**
26 Windsor Ave.
Lynn, MA 01902
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Employee Expense Reimbursement**
Is the claim subject to offset? ☒ No ☐ Yes

3.133 Nonpriority creditor's name and mailing address **HAYSEN**
25242 NETWORK PLACE
CHICAGO, IL 60673-1252
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$890.52**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.134 Nonpriority creditor's name and mailing address **HILL HOLLIDAY LLC**
53 STATE STREET
BOSTON, MA 02109
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$19,350.00**
☒ Contingent
☒ Unliquidated
☒ Disputed
Basis for the claim: **Trade Debt dispute re services allegedly provided**
Is the claim subject to offset? ☒ No ☐ Yes

3.135 Nonpriority creditor's name and mailing address **HOCKENBERG NEWBURGH**
1400 NW 100TH STREET
CLIVE, IA 50325
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$4,989.72**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.136 Nonpriority creditor's name and mailing address **HOPE INDUSTRIAL SYSTEMS INC**
1325 NORTHMEADOW PARKWAY
SUITE 100
ROSWELL, GA 30076
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$1,759.55**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.137 Nonpriority creditor's name and mailing address **HOWELLS MOTOR FREIGH**
P. O. Box 12308
Roanoke, VA 24024
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$43,602.52**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.138 Nonpriority creditor's name and mailing address **HPR FIRE PROTECTION CO.**
52 MORRISON ROAD WEST
WAKEFIELD, MA 01880
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$9,865.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.139	<p>Nonpriority creditor's name and mailing address HUNTER PROTECTIVE SERVICES INC 10 MALL ROAD STE 125 BURLINGTON, MA 01803</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$42,385.92
3.140	<p>Nonpriority creditor's name and mailing address HYGIENA 941 AVENIDA ACASO ATT: ACCTS. RECEIVABLE CAMARILLO, CA 93012</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$852.80
3.141	<p>Nonpriority creditor's name and mailing address IAB SOLUTIONS LLC 233 Northern Blvd Suite 2 Clarks Summit, PA 18411</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.142	<p>Nonpriority creditor's name and mailing address IBM CORPORATION P.O. BOX 534151 ATLANTA, GA 30353-4151</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$900.00
3.143	<p>Nonpriority creditor's name and mailing address INDEPENDENT DAIRY COMMODITIES LLC MANAGING AGENT 1201 CENTRE STREET SUITE 2 EASTON, PA 18042</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$144,646.50
3.144	<p>Nonpriority creditor's name and mailing address INDIANA SUGARS 5918 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$29,243.40
3.145	<p>Nonpriority creditor's name and mailing address INDUSTRIAL SALES & DISTRIBUTION INC PO BOX 394 WESTERLY, RI 02891</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$29,672.28

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.146	<p>Nonpriority creditor's name and mailing address INDUSTRIAL SILO SOURCE INC 2444 WILLIAMS HIGHWAY PO BOX 276 WILLIAMSTOWN, WV 26187-0276</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$29,172.66</u>
3.147	<p>Nonpriority creditor's name and mailing address INDUSTRIAL TIRE SALES INC. 7 GRANT AVE BURLINGTON, MA 01803</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$1,337.54</u>
3.148	<p>Nonpriority creditor's name and mailing address INTERFLEX GROUP MANAGING AGENT PO BOX 74744 CHICAGO, IL 60694-4744</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$63,894.43</u>
3.149	<p>Nonpriority creditor's name and mailing address INTERNATIONAL FOODCRAFT MANAGING AGENT 1601 EAST LINDEN AVENUE LINDEN, NJ 07036-1508</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$62,343.60</u>
3.150	<p>Nonpriority creditor's name and mailing address INTERNATIONAL MOLASSES P.O. BOX 67 ROCHELLE PARK, NJ 07662</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$18,505.05</u>
3.151	<p>Nonpriority creditor's name and mailing address INTERSTATE CONTAINER CORP. ATTN: LOCKBOX OPERATION 536338 307 23RD ST EXTENSION SUITE 950 PITTSBURGH, PA 15215</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$100,989.65</u>
3.152	<p>Nonpriority creditor's name and mailing address IPSUMM 68 NEW HAMPSHIRE AVENUE PORTSMOUTH, NH 03801</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<u>\$10,667.50</u>

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if known) **18-11217**

3.153	Nonpriority creditor's name and mailing address J MIKE ALEXANDER & ASSOC 6400 ATHENS - BOONESBORO RD LEXINGTON, KY 40509 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,267.40
3.154	Nonpriority creditor's name and mailing address JACKSON LEWIS PC PO BOX 416019 BOSTON, MA 02241-6019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,354.20
3.155	Nonpriority creditor's name and mailing address JIFFY MART PO BOX 229 PERKINSVILLE, VT 05151 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer refund due</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.156	Nonpriority creditor's name and mailing address Johnson, Brendan 24 Laurel Ave. Methuen, MA 01844 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.157	Nonpriority creditor's name and mailing address KAHLER-SENDERS GROUP, INC. ATTN: COMMISSIONS DEPT 4706 - A 20TH STREET EAST FIFE, WA 98424 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,319.55
3.158	Nonpriority creditor's name and mailing address Kapferer, Peter 12521 Bane Lane Lyndonville, NY 14098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.159	Nonpriority creditor's name and mailing address KATRINA ST COLUMBIA 1303 SANFORD DRIVE BENTONVILLE, AR 72712 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,918.75

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.160	Nonpriority creditor's name and mailing address KLIKLOK CORPORATION 5224 SNAPPINGER WOODS DR. DECATUR, GA 30035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,538.09
3.161	Nonpriority creditor's name and mailing address KOSTER KEUNEN, INC. P.O. BOX 69 WATERTOWN, CT 06795 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,874.00
3.162	Nonpriority creditor's name and mailing address Kredor, Theodor 616 Ashwood Drive Keller, TX 76248 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Expense Reimbursement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.163	Nonpriority creditor's name and mailing address LCL BULK TRANSPORT IN 2100 Riverside Dr Green Bay, WI 54301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,384.78
3.164	Nonpriority creditor's name and mailing address LIFE SUPPORT SYSTEMS 59 ALLIED DRIVE DEDHAM, MA 02026-0051 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,140.00
3.165	Nonpriority creditor's name and mailing address M A PATTERSON COMPANY 530 SOUTH NOLEN DRIVE SOUTHLAKE, TX 76092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,097.50
3.166	Nonpriority creditor's name and mailing address M. KORSON & CO 91 Washington St Somerville, MA 02143 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,920.00

Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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3.167	Nonpriority creditor's name and mailing address MALTZ SALES CO. INC. 67 GREEN STREET FOXBORO, MA 02035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,782.83
3.168	Nonpriority creditor's name and mailing address MANCINI SALES & MARKETING PO BOX 57218 SALT LAKE CITY, UT 84157-0218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,086.12
3.169	Nonpriority creditor's name and mailing address MANDLIK & RHODES PO Box 249 Barrington, IL 60011-0249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.170	Nonpriority creditor's name and mailing address MANTROSE-BRADSHAW-ZINSSER GROUP P.O. BOX 931949 CLEVELAND, OH 44193 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,390.00
3.171	Nonpriority creditor's name and mailing address MARKEM - IMAJE CORPORATION PO BOX 3542 BOSTON, MA 02241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,714.12
3.172	Nonpriority creditor's name and mailing address MASS DEPARTMENT OF ENVIRONMENTAL PROTECTION P. O. BOX 3982 BOSTON, MA 02211-3982 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.173	Nonpriority creditor's name and mailing address MASSACHUSETTS LABOR LAW POSTER SERVICE 71 COMMERCIAL STREET #311 BOSTON, MA 00210-9132 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$152.00

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.174	Nonpriority creditor's name and mailing address MASSACHUSETTS MANUFACTURING EXTENSION PARTENSHIP INC 100 GROVE STREET SUITE 108 WORCESTER, MA 01605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.175	Nonpriority creditor's name and mailing address MAYFIELD TRANSFER CO 3200 W. Lake Street Melrose Park, IL 60160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$17,476.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.176	Nonpriority creditor's name and mailing address MAYS CHEMICAL COMPANY PO BOX 844598 BOSTON, MA 02284-4598 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,459.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.177	Nonpriority creditor's name and mailing address MCINTOSH BOX & PALLET CO INC 5864 PYLE DRIVE EAST SYRACUSE, NY 13057 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,243.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.178	Nonpriority creditor's name and mailing address MCMMASTER-CARR SUPPLY CO P.O. BOX 7690 CHICAGO, IL 60680-7690 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,720.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.179	Nonpriority creditor's name and mailing address MEMIC INDEMNITY CO PO BOX 9500 LEWISTON, ME 04243-9500 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,898.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.180	Nonpriority creditor's name and mailing address MERCHANDISING SERVICES CO 9891 MONTGOMERY RD #320 CINCINNATI, OH 45242 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$442.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.181	<p>Nonpriority creditor's name and mailing address</p> <p>METTLER - TOLEDO SAFELINE 22677 NETWORK PLACE CHICAGO, IL 60673-1226</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$4,806.98</p>
3.182	<p>Nonpriority creditor's name and mailing address</p> <p>MIDDLESEX GASES & TECHNOLOGIES PO BOX 490249 EVERETT, MA 02149</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$3,313.31</p>
3.183	<p>Nonpriority creditor's name and mailing address</p> <p>MOI FOODS USA INC 1300 RIDENOUR BLVD SUITE 210 KENNESAW, GA 30152</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$50,182.80</p>
3.184	<p>Nonpriority creditor's name and mailing address</p> <p>MOLECULAR SYSTEMS OF N.E.,INC. 2 MILL & MAIN PLACE SUITE 525 MAYNARD, MA 01754</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$253.90</p>
3.185	<p>Nonpriority creditor's name and mailing address</p> <p>MOTION INDUSTRIES, INC. PO BOX 415749 BOSTON, MA 02241</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$28,558.61</p>
3.186	<p>Nonpriority creditor's name and mailing address</p> <p>MY FAX 2 GURDWARA ROAD SUITE 300 OTTAWA ON K2E1A2 CANADA</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$8.70</p>
3.187	<p>Nonpriority creditor's name and mailing address</p> <p>MYSTIC LANDSCAPING 104 BOW STREET PEABODY, MA 01960</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$17,400.00</p>

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

3.188	<p>Nonpriority creditor's name and mailing address</p> <p>NATIONAL GRID MANAGING AGENT PO BOX 11737 NEWARK, NJ 07101-4737</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$312,792.24
3.189	<p>Nonpriority creditor's name and mailing address</p> <p>NATIONAL GRID PO BOX 11735 NEWARK, NJ 07101-4735</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.190	<p>Nonpriority creditor's name and mailing address</p> <p>Neave, Thomas 15 Wedgewood Ct Newtown, CT 06470</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Employee Expense Reimbursement</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.191	<p>Nonpriority creditor's name and mailing address</p> <p>NECCO REALTY MA I 2 BETHESDA METRO CENTER 14TH FLOOR Bethesda, MD 20814</p> <p>Date(s) debt was incurred <u>December 2007 though April 2017</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Uncollected rent prior to current lease</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$33,774,826.78
3.192	<p>Nonpriority creditor's name and mailing address</p> <p>NEOGEN CORPORATION 25153 NETWORK PLACE CHICAGO, IL 60673-1251</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,262.76
3.193	<p>Nonpriority creditor's name and mailing address</p> <p>NESC STAFFING CORP PO BOX 204653 DALLAS, TX 75320-4653</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,000.00
3.194	<p>Nonpriority creditor's name and mailing address</p> <p>NESTLE QUALITY ASSURANCE ATTN: ACCOUNTING OPERATIONS 445 STATE STREET FREMONT, MI 49413</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$19,553.00

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.195	Nonpriority creditor's name and mailing address NEW BOSTON PUMP SERVICE, INC. 6 RAYMOND AVE UNIT B1 SALEM, NH 03079 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,508.31
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3.196	Nonpriority creditor's name and mailing address NEW ENGLAND CONTROLS 9 OXFORD ROAD MANSFIELD, MA 02048 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,450.50
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3.197	Nonpriority creditor's name and mailing address NEW ENGLAND MOTOR FREIGHT MANAGING AGENT 1-71 North Avenue East Elizabeth, NJ 07201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$514,922.76
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3.198	Nonpriority creditor's name and mailing address NEW ENGLAND WOODEN WARE CORP. MANAGING AGENT 205 SCHOOL STREET STE 201 GARDNER, MA 01440-2781 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$602,837.07
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3.199	Nonpriority creditor's name and mailing address NEW PENN MOTOR EXPRE 625 South 5th Avenue Lebanon, PA 17042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.51
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3.200	Nonpriority creditor's name and mailing address NORTECH PACKAGING LLC DBA TISHMA TECHNOLOGIES 101 EAST STATE PARKWAY SCHAUMBURG, IL 60173 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,178.15
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3.201	Nonpriority creditor's name and mailing address NORTH CENTRAL COMPANIES MANAGING AGENT 601 CARLSON PARKWAY #400 MINNETONKA, MN 55305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$261,269.67
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Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**
Name

3.202	<p>Nonpriority creditor's name and mailing address NORTHEAST ENVIRONMENTAL LAB 41 DAYTON ST DANVERS, MA 01923</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$3,892.21</p>
3.203	<p>Nonpriority creditor's name and mailing address NORTHLAND INDUSTRIAL TRUCK CO PO BOX 845534 BOSTON, MA 02284-5534</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$4,635.00</p>
3.204	<p>Nonpriority creditor's name and mailing address NORTHRUP PRINTING 919 WINTHROP AVENUE REVERE, MA 02151</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,803.00</p>
3.205	<p>Nonpriority creditor's name and mailing address OLMSTED-FLINT, INC. 31 DRAPER STREET WOBURN, MA 01801</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$16,501.37</p>
3.206	<p>Nonpriority creditor's name and mailing address OMEGA ENGINEERING 26904 NETWORK PLACE CHICAGO, IL 60673-1269</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$843.15</p>
3.207	<p>Nonpriority creditor's name and mailing address ONE CALL VENTILATION 277 WASHINGTON STREET WEYMOUTH, MA 02188</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$450.00</p>
3.208	<p>Nonpriority creditor's name and mailing address OXFORD GRAPHICS PO BOX 1000 DEPT 0114 MEMPHIS, TN 38148-0114</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$31,112.38</p>

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.209	Nonpriority creditor's name and mailing address PACKAGING CORP OF AMERICA OF AMERICA P.O. BOX 12406 NEWARK, NJ 07101-3506 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,740.20
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3.210	Nonpriority creditor's name and mailing address PARKER INGREDIENTS, LLC 411 THEODORE FREMD AVE RYE, NY 10580 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,711.30
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3.211	Nonpriority creditor's name and mailing address PAULAU CORPORATION 105 MELRICH ROAD CRANBURY, NJ 08512 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,580.00
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3.212	Nonpriority creditor's name and mailing address PEAKER SERVICES INC 8080 KENSINGTON COURT BRIGHTON, MI 48116-8591 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,771.84
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3.213	Nonpriority creditor's name and mailing address PIAB USA, INC. 65 SHARP ST. ATTN: FINANCE DEPT. HINGHAM, MA 02043 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,729.96
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3.214	Nonpriority creditor's name and mailing address PINNACLE BUSINESS PRODUCTS LLC PO BOX 419130 BOSTON, MA 02241-9130 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,777.35
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3.215	Nonpriority creditor's name and mailing address POLYKING, INC. 2227 LAKEWOOD DRIVE NOKOMIS, FL 34275 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,251.00
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Debtor	New England Confectionery Company, Inc. <small>Name</small>	Case number (if known)	18-11217
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3.216	Nonpriority creditor's name and mailing address PRIME INGREDIENTS INC. 280 NORTH MIDLAND AVE SUITE 316 SADDLE BROOK, NJ 07663 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,465.80
3.217	Nonpriority creditor's name and mailing address PROMARK MARKETING PO BOX 790 CARENCRO, LA 70520 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,936.82
3.218	Nonpriority creditor's name and mailing address PURCHASE POWER PO BOX 371874 PITTSBURGH, PA 15250-7874 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,256.42
3.219	Nonpriority creditor's name and mailing address QUENCH USA INC PO BOX 8500 LOCKBOX 53203 PHILADELPHIA, PA 19178-3203 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$127.51
3.220	Nonpriority creditor's name and mailing address QUILL P. O. BOX 37600 PHILADELPHIA, PA 19101-0600 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,827.40
3.221	Nonpriority creditor's name and mailing address R & L CARRIERS 600 Gillham Rd. Wilmington, OH 45177 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,664.24
3.222	Nonpriority creditor's name and mailing address RADWELL INTERNATIONAL, INC. PO BOX 419343 BOSTON, MA 02241-9343 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.43

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.223	<p>Nonpriority creditor's name and mailing address</p> <p>RAND WHITNEY CONTAINER CORP PO BOX 847459 BOSTON, MA 02284-7459</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$10,176.00</p>
3.224	<p>Nonpriority creditor's name and mailing address</p> <p>RECCO, INC 22 SIXTH ROAD WOBURN, MA 01801-1735</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,843.00</p>
3.225	<p>Nonpriority creditor's name and mailing address</p> <p>REDTAIL SOLUTIONS 75 REMITTANCE DR DEPT 6541 CHICAGO, IL 60675-6541</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$6,689.58</p>
3.226	<p>Nonpriority creditor's name and mailing address</p> <p>REPUBLIC SERVICES #94 P. O. BOX 9001099 LOUISVILLE, KY 40290-1099</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Unknown</p>
3.227	<p>Nonpriority creditor's name and mailing address</p> <p>ROFFMAN HORVITZ, PLC 8300 GREENSBORO DRIVE SUITE 800 MCLEAN, VA 22102</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,750.00</p>
3.228	<p>Nonpriority creditor's name and mailing address</p> <p>ROSS UPSTATE SALES & MARKETING 480 BROADWAY LL-23 SARATOGA SPRINGS, NY 12866</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$149.47</p>
3.229	<p>Nonpriority creditor's name and mailing address</p> <p>ROYAL CUSTOMS BROKERS INC PO BOX 1117 FORT ERIE ON L2A5N9 CANADA</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade Debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$8,837.25</p>

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.230	Nonpriority creditor's name and mailing address SESOTEC INC 1234 HARDT CIRCLE BARTLETT, IL 60103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,131.60
<hr/>			
3.231	Nonpriority creditor's name and mailing address SETTERSTIX PO BOX 978691 DALLAS, TX 75397-8691 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,399.73
<hr/>			
3.232	Nonpriority creditor's name and mailing address SGS REFRIGERATION INC 827 PROGRESS DRIVE DIXON, IL 61021 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$533.83
<hr/>			
3.233	Nonpriority creditor's name and mailing address SHANGHAI HANCHANG PRINTING c/o Ungermans Packaging Solutions 1699 Highway #1 Fairfield, IA 52556 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$532,278.50
<hr/>			
3.234	Nonpriority creditor's name and mailing address SHELL ENERGY N. AMERICA (US) PO BOX 7247-6355 PHILADELPHIA, PA 19170-6355 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,535.38
<hr/>			
3.235	Nonpriority creditor's name and mailing address SHI CORP PO BOX 952121 DALLAS, TX 75395-2121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,445.75
<hr/>			
3.236	Nonpriority creditor's name and mailing address SHRINK PACKAGING SYSTEMS INC. PO BOX 845454 BOSTON, MA 02284-5454 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,639.95

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.237	<p>Nonpriority creditor's name and mailing address</p> <p>SILESIA FLAVORS, INC. 5250 PRAIRIE STONE PARKWAY HOFFMAN ESTATES, IL 60192</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,031.60
3.238	<p>Nonpriority creditor's name and mailing address</p> <p>SILLIKER INC 3155 PAYSHERE CIRCLE CHICAGO, IL 60674</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,276.51
3.239	<p>Nonpriority creditor's name and mailing address</p> <p>SILLIKER INC 6390 HEDGEWOOD DRIVE ALLENTOWN, PA 18106</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,457.66
3.240	<p>Nonpriority creditor's name and mailing address</p> <p>SIMPLEXGRINNELL LP DEPT. CH 10320 PALATINE, IL 60055-0320</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$20,038.40
3.241	<p>Nonpriority creditor's name and mailing address</p> <p>SIXTO PACKAGING MANAGING AGENT 13301 NW 38 CT MIAMI, FL 33054</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt subject to settlement discussions</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$76,782.87
3.242	<p>Nonpriority creditor's name and mailing address</p> <p>Solid Gold Chocolate 1070 East 2nd Street Brooklyn, NY 11230</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,973.23
3.243	<p>Nonpriority creditor's name and mailing address</p> <p>SONOCO PRODUCTS COMPANY 91218 COLLECTIONS CENTER DRIVE CUST# RPP0070002 PLANT # DO14 CHICAGO, IL 60693</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$32,547.46

Debtor New England Confectionery Company, Inc. Case number (if known) 18-11217

Name

3.244	Nonpriority creditor's name and mailing address SPARKS BELTING CO. 3800 STAHL DRIVE SE GRAND HAVEN, MI 49546 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,933.53
<hr/>			
3.245	Nonpriority creditor's name and mailing address SPECIALIZED PLASTICS MANAGING AGENT 567 MAIN ST HUDSON, MA 01749 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,896.20
<hr/>			
3.246	Nonpriority creditor's name and mailing address SPINNING WHEELS EXPR 152 Lynnway Lynn, MA 01902 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$64,857.50
<hr/>			
3.247	Nonpriority creditor's name and mailing address SPS COMMERCE PO BOX 205782 DALLAS, TX 75320-5782 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$909.00
<hr/>			
3.248	Nonpriority creditor's name and mailing address SQFI FOOD MARKETING INSTITUE 2345 CRYSTAL DRIVE SUITE 8100 ATTN: AR ARLINGTON, VA 22202-4801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
<hr/>			
3.249	Nonpriority creditor's name and mailing address STAPLES INDUSTRIAL PO BOX 415256 BOSTON, MA 02241-5256 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,727.10
<hr/>			
3.250	Nonpriority creditor's name and mailing address STAR SNACKS CO.,LLC. 105 HARBOR DRIVE JERSEY CITY, NJ 07305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,382.10

Debtor **New England Confectionery Company, Inc.**
Name

Case number (if known) **18-11217**

3.251	Nonpriority creditor's name and mailing address SUN VALLEY RAISINS INC MANAGING AGENT 9595 S HUGHES FRESNO, CA 93706 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,200.00
3.252	Nonpriority creditor's name and mailing address SUNBELT RENTALS 800 HARTFORD TPKE OFC SHREWSBURY, MA 01545-4107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,586.67
3.253	Nonpriority creditor's name and mailing address SUPREME INDUSTRIAL PRODUCTS 11 NORFOLK STREET UNIT 3 MANSFIELD, MA 02048 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,437.21
3.254	Nonpriority creditor's name and mailing address SWEETENERS PLUS, INC. MANAGING AGENT PO BOX 150 WARSAW, NY 14569 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$122,663.08
3.255	Nonpriority creditor's name and mailing address TANIS CONFECTIONERY PO BOX 331 4900 AH OOSTERHOUT MADE NL 4921 PJ THE NETHERLANDS Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,292.37
3.256	Nonpriority creditor's name and mailing address TEACHERS DISCOVERY 2741 PALDAN DRIVE AUBURN HILLS, MI 48326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customer refund due</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,222.80
3.257	Nonpriority creditor's name and mailing address TEAM EXPRESS INC 40 Strafello Dr Avon, MA 02322 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166,225.00

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**
Name

3.258 Nonpriority creditor's name and mailing address **TERPCO INC**
99 16TH ST SW
BARBERTON, OH 44203
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$297.39**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.259 Nonpriority creditor's name and mailing address **TERRILL TRANSPORTATI**
6818 Patterson Pass Rd.
Livermore, CA 94550
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$14,345.51**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.260 Nonpriority creditor's name and mailing address **THE ANGELL PENSION GROUP INC**
88 BOYD AVENUE
EAST PROVIDENCE, RI 02915
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.261 Nonpriority creditor's name and mailing address **THERMO - CRAFT ENGINEERING**
701 WESTERN AVENUE
LYNN, MA 01905
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$6,765.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.262 Nonpriority creditor's name and mailing address **THIELE ENG.**
25235 NETWORK PLACE
CHICAGO, IL 60673
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$457.87**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.263 Nonpriority creditor's name and mailing address **TIC GUMS**
4609 RICHLINN DRIVE
BELCAMP, MD 21017
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$20,640.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.264 Nonpriority creditor's name and mailing address **TPX COMMUNICATIONS**
PO BOX 984001
BOSTON, MA 02298-4001
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$3,798.47**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.265	Nonpriority creditor's name and mailing address TRAFFIC AUDIT & BUREAU SERVICES INC PO BOX 6154 CHELSEA, MA 02150-0006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
<hr/>			
3.266	Nonpriority creditor's name and mailing address TRANSMAR COMMODITY GROUP MANAGING AGENT 200 SOUTH ST MORRISTOWN, NJ 07960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$294,847.34
<hr/>			
3.267	Nonpriority creditor's name and mailing address TRASK PETROLEUM EQUIPMENT CO 800ELMWOOD AVENUE PROVIDENCE, RI 02907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,492.75
<hr/>			
3.268	Nonpriority creditor's name and mailing address TRELFA LABS INC 6 MERRILL STREET UNIT 4 SALISBURY, MA 01952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,190.00
<hr/>			
3.269	Nonpriority creditor's name and mailing address TRICO CORPORATION 47 ANTARES DRIVE OTTAWA ON K2E 7W6 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$119,646.56
<hr/>			
3.270	Nonpriority creditor's name and mailing address TUV SUD AMERICA INC PO BOX 536415 PITTSBURGH, PA 15253-5906 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,427.05
<hr/>			
3.271	Nonpriority creditor's name and mailing address U.S. PLASTICS CORP. 1390 NEWBRECHT ROAD LIMA, OH 45801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,276.50

Debtor	New England Confectionery Company, Inc. Name	Case number (if known)	18-11217
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3.272	Nonpriority creditor's name and mailing address ULINE PO BOX 88741 CHICAGO, IL 60680-1741 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,116.23
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3.273	Nonpriority creditor's name and mailing address UNGERER & COMPANY 4 BRIDGEWATER LANE LINCOLN PARK, NJ 07035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,753.78
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3.274	Nonpriority creditor's name and mailing address UNICORR PACKAGING GROUP MANAGING AGENT 4282 PAYSHERE CIRCLE CHICAGO, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248,799.46
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3.275	Nonpriority creditor's name and mailing address UNITED COCOA PROCESSOR, INC. MANAGING AGENT PO BOX 21064 NEW YORK, NY 10087-1064 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$370,502.37
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3.276	Nonpriority creditor's name and mailing address UNITED SALES CORP PO BOX 2688 VIRGINIA BEACH, VA 23450-2688 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$379.97
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3.277	Nonpriority creditor's name and mailing address United States Trustee 5 Post Office Square Suite 1000 Boston, MA 02109-3934 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>For notice purposes only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.278	Nonpriority creditor's name and mailing address UNITED SUGAR CORP. MANAGING AGENT SDS 12-0548 P.O. BOX 86 MINNEAPOLIS, MN 55486 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159,599.27
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Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

Name

3.279	Nonpriority creditor's name and mailing address US PLASTIC TRADING & LOGISTICS INC 20883 NE 30TH COURT AVENTURA, FL 33180 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,501.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.280	Nonpriority creditor's name and mailing address VERIZON PO BOX 15043 ALBANY, MA 12212-5043 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$581.34 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.281	Nonpriority creditor's name and mailing address VERIZON WIRELESS PO BOX 15062 ALBANY, NY 12212-5062 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$974.82 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.282	Nonpriority creditor's name and mailing address VERNDALE SALES CO. MANAGING AGENT P.O. BOX 59001 DETROIT, MI 48267-5900 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$92,084.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.283	Nonpriority creditor's name and mailing address VIDEOJET TECHNOLOGIES, INC 12113 COLLECTION CENTER DRIVE CHICAGO, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$646.11 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.284	Nonpriority creditor's name and mailing address WARREN PIKE ASSOC DIV JG INDUSTRIES 45 SOUTH ST HOPKINGTON, MA 01748 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,987.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.285	Nonpriority creditor's name and mailing address WATSON FOODS CO., INC. 301 HEFFERNAN DRIVE WEST HAVEN, CT 06516 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,960.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **New England Confectionery Company, Inc.** Case number (if known) **18-11217**

3.286 Nonpriority creditor's name and mailing address **WICKED STAFFING SOLUTIONS LLC**
165 SOUTH RIVER ROAD
UNIT C
BEDFORD, NH 03110
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$10,906.95**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.287 Nonpriority creditor's name and mailing address **WILLIAMSON NEW ENGLAND**
SERVICE CORP
PO BOX 6265
CHELSEA, MA 02150
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$2,897.92**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.288 Nonpriority creditor's name and mailing address **XYLEM WATER SOLUTIONS USA INC**
78K OLYMPIA AVENUE
WOBURN, MA 01801
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$3,699.71**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.289 Nonpriority creditor's name and mailing address **ZAJAC**
92 INDUSTRIAL ROAD
SACO, ME 04072
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$1,065.75**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade Debt**
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 36,312.57
5b. +	\$ 45,117,357.77
5c.	\$ 45,153,670.34

Fill in this information to identify the case:

Debtor name **New England Confectionery Company, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) **18-11217**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Contract for Landscape dated 3/2/2016

State the term remaining

List the contract number of any government contract

**Abbott Construction & Landscaping LLC
7 Towne Rd.
Boxford, MA 01921**

2.2. State what the contract or lease is for and the nature of the debtor's interest

Management Agreement dated 9/8/2015

State the term remaining

List the contract number of any government contract

**AMERICAN CAPITAL, LTD.
2 BETHESDA METRO CENTER, 14TH FL
BETHESDA, MD 20814**

2.3. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure Agreement

State the term remaining

List the contract number of any government contract

**Anderson Group
111 2nd Ave NE
Suite 1520
Saint Petersburg, FL 33701**

2.4. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated 3/1/2013

State the term remaining

List the contract number of any government contract

**Archpoint, Inc.
140 HEIMER ROAD
SUITE 200
SAN ANTONIO, TX 78232**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.5. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract

Arellano, George
19 Boardman St
#2
East Boston, MA 02128

- 2.6. State what the contract or lease is for and the nature of the debtor's interest **Indenture of Lease**

State the term remaining

List the contract number of any government contract

Atlantic-Revere Realty LLC
c/o Atlantic Management Company, Inc.
205 Newbury Street
Attn: Joseph Zink
Framingham, MA 01701

- 2.7. State what the contract or lease is for and the nature of the debtor's interest **Agreement effective May 1, 2017**

State the term remaining

List the contract number of any government contract

BAKERY & CONFECT. LOCAL #348
1 PLEASANT ST
FRAMINGHAM, MA 01701

- 2.8. State what the contract or lease is for and the nature of the debtor's interest **Processing Agreement dated 11/12/2014**

State the term remaining

List the contract number of any government contract

Bariatrx Nutrition, Inc.
4905 Fairway
Lachine
Quebec H8T 1B7
CANADA

- 2.9. State what the contract or lease is for and the nature of the debtor's interest **Prepetition Management Plan**

State the term remaining

List the contract number of any government contract

Barnes, Thomas
2861 Darby's Run
Tarpon Springs, FL 34688

- 2.10. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated June 16, 2017**

State the term remaining

List the contract number of any government contract

Basile, Alex
544 Park Ave
Revere, MA 02151

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.11. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

BBX Capital
401 E Las Olas Blvd
Suite 800
Fort Lauderdale, FL 33301

- 2.12. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

BHMS Investments
126 E 56th St
19th Floor
New York, NY 10022

- 2.13. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 4/1/2013**

State the term remaining

List the contract number of any government contract

Blackford, Inc.
PO BOX 7629
SHAWNEE MISSION, KS 66207

- 2.14. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

Blackstreet Capital Holdings, LLC
5425 Wisconsin Ave
Suite 701
Chevy Chase, MD 20815

- 2.15. State what the contract or lease is for and the nature of the debtor's interest **Contract dated 10/23/2017**

State the term remaining

List the contract number of any government contract

Brooks Peanut Company
402 East Main St.
PO Box 305
Samson, AL 36477

- 2.16. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

Brynwood Partners
8 Sound Shore Drive
Suite 265
Greenwich, CT 06830

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

- 2.17. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 5/15/2013**

State the term remaining

List the contract number of any government contract _____

Burdett Beckmann, Inc.
5851 JOHNSON STREET
HOLLYWOOD, FL 33021

- 2.18. State what the contract or lease is for and the nature of the debtor's interest **Copier Maintenance Agreement**

State the term remaining

List the contract number of any government contract _____

Canon Solutions America
300 Commerce Square Bvd.
Burlington, NJ 08016

- 2.19. State what the contract or lease is for and the nature of the debtor's interest **Sales Contract Num: 400093928 dated 11/01/2017**

State the term remaining

List the contract number of any government contract _____

Cargill Texturizing Solution
15407 MCGINTY ROAD WEST
WAYZATA, MN 55391

- 2.20. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 2/15/2013**

State the term remaining

List the contract number of any government contract _____

CARLIN O'BRIEN
1851 HOWARD STREET - M
ELK GROVE, IL 60007

- 2.21. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract _____

Centeio, Arlindo
49 Hecla Street #1
Dorchester, MA 02122

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.22. State what the contract or lease is for and the nature of the debtor's interest **Agreement for Professional Services dated 11/10/2015**

State the term remaining

List the contract number of any government contract

CG Silvers Consulting, LLC
4440 Blue Ridge Drive
Douglasville, GA 30135

- 2.23. State what the contract or lease is for and the nature of the debtor's interest **Conveyance, assignment and transfer agreeent dated 12/5/2007**

State the term remaining

List the contract number of any government contract

CITY OF REVERE
281 Broadway
Revere, MA 02151-5027

- 2.24. State what the contract or lease is for and the nature of the debtor's interest **Tax Incremental Financing Agreement dated 6/25/2003**

State the term remaining

List the contract number of any government contract

CITY OF REVERE
281 Broadway
Revere, MA 02151-5027

- 2.25. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 8/1/2013**

State the term remaining

List the contract number of any government contract

Co-Sales, Inc.-Intermountain Division
13245 RIVERSIDE DRIVE
SUITE 540
SHERMAN OAKS, CA 91423

- 2.26. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 8/1/2013**

State the term remaining

List the contract number of any government contract

Co-Sales, Inc.-Northern California Divis
7133 KOLL CENTER PARKWAY
SUITE 200
PLEASANTON, CA 94566

- 2.27. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 8/1/2013**

State the term remaining

List the contract number of any

Co-Sales, Inc.-Southern California Divis
13245 RIVERSIDE DRIVE
SUITE 540
SHERMAN OAKS, CA 91423

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.28. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated October 23, 2017**

State the term remaining

List the contract number of any government contract

Coletti, John
59 Norfolk Ave
Swampscott, MA 01907

- 2.29. State what the contract or lease is for and the nature of the debtor's interest **Workforce Training Fund Program Grant #60021**

State the term remaining

List the contract number of any government contract

Commonwealth Corporation
2 Oliver Street
5th Floor
Attn: Kim Bryson
Boston, MA 02109

- 2.30. State what the contract or lease is for and the nature of the debtor's interest **Marketing Access Program Agreement Number 126**

State the term remaining

List the contract number of any government contract

Confectioners Association of the U.S.A.
110130th Street NW
Suite #200
Washington, DC 20007

- 2.31. State what the contract or lease is for and the nature of the debtor's interest **Prepetition Management Plan**

State the term remaining

List the contract number of any government contract

Corey, Jeanne
128 Highview St.
Westwood, MA 02090

- 2.32. State what the contract or lease is for and the nature of the debtor's interest **Task Order 2016-0219 pursuant to 2016 PROFESSIONAL SERVICES AGREEMENT**

State the term remaining

List the contract number of any government contract

Customized Energy Solutions Ltd.
1528 Walnut Street
22nd Floor
Philadelphia, PA 19102

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.33. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated July 14, 2017**

State the term remaining

List the contract number of any government contract

DelMonti Jr, Phillip
5 Howlett Street
Topsfield, MA 01983

- 2.34. State what the contract or lease is for and the nature of the debtor's interest **Limited License to Use Trademarks dated 4/15/2016**

State the term remaining

List the contract number of any government contract

Dixie Union Station
110 West Main Street
Mason, OH 45050

- 2.35. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement**

State the term remaining

List the contract number of any government contract

Doug Dobrinsky
d/b/a DD Focused Sales Solutions
2629 No Side Rd
Burlington ON L7M 0T1
CANADA

- 2.36. State what the contract or lease is for and the nature of the debtor's interest **ITx Master Service Agreement**

State the term remaining

List the contract number of any government contract

DSCI, LLC
3030 Wyman Street
Waltham, MA 02451

- 2.37. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract

Dutra, Eduardo
69 Appleton St.
Arlington, MA 02476

- 2.38. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 3/1/2014**

State the term remaining

List the contract number of any government contract

E.A. Berg and Sons, Inc.
75 WEST CENTURY ROAD
PARAMUS, NJ 07652

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.39. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure Agreement

State the term remaining

List the contract number of any government contract

Elvan
Suite 201
Salem, NH 03079

- 2.40. State what the contract or lease is for and the nature of the debtor's interest

Letter Agreement dated August 29, 2017

State the term remaining

List the contract number of any government contract

Etienne, Jacqueline
PO Box 462
East Boston, MA 02128

- 2.41. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure Agreement

State the term remaining

List the contract number of any government contract

Eurazeo North America, Inc.
745 5th Ave
New York, NY 10151

- 2.42. State what the contract or lease is for and the nature of the debtor's interest

Partnership Program Agreement dated 4/1/2016

State the term remaining

List the contract number of any government contract

EXPERT LASER SERVICES, INC.
P. O. BOX 744
SOUTHBRIDGE, MA 01550

- 2.43. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure Agreement

State the term remaining

List the contract number of any government contract

Frankford Candy
9300 Ashton Rd
Philadelphia, PA 19114

- 2.44. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated October 21, 2013

Godwin Associates, LLC
5963 Bryn Brooke Dr.
Raleigh, NC 27614

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

- 2.45. State what the contract or lease is for and the nature of the debtor's interest **Computer Service Agreement**

State the term remaining

List the contract number of any government contract _____

Golden Touch Computer Solutions
PO Box 9035
Concord, NH 03303

- 2.46. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Gordon Brothers Commercial & Industrial
800 Boylston St
27th Floor
Boston, MA 02199

- 2.47. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated June 9, 2017**

State the term remaining

List the contract number of any government contract _____

Gosine, Stephen
54 Bromfield Street
Unit #5
Newburyport, MA 01950

- 2.48. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated March 26, 2018**

State the term remaining

List the contract number of any government contract _____

Handel, Mary
2907 Dumbarton St NW
Washington, DC 20007

- 2.49. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Highlander Partners
300 Crescent Court
Suite 550
Dallas, TX 75201

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.50. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

Hilco Industrial
171 Monroe Ave NW
Suite 500
Grand Rapids, MI 49503

- 2.51. State what the contract or lease is for and the nature of the debtor's interest **Statement of Work #6 subject to a Master Services Agreement for advertising services dated June 30, 2015**

State the term remaining

List the contract number of any government contract

Hill Holiday LLC
53 State Street
Boston, MA 02109

- 2.52. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated October 6, 2015**

State the term remaining

List the contract number of any government contract

Hockenberg Newburgh
1400 NW 100t Street
Clive, IA 50325

- 2.53. State what the contract or lease is for and the nature of the debtor's interest **Security coverage of NECCO premises dated October 15, 2013**

State the term remaining

List the contract number of any government contract

Hunter Protection Services, Inc.
93 Center Street
Burlington, MA 01803

- 2.54. State what the contract or lease is for and the nature of the debtor's interest **Forklift Master Lease Agreement dated 1/18/2017**

State the term remaining

List the contract number of any government contract

HYG Financial Services Inc.
300 E. John Carpenter Freeway
Irving, TX 75062-2712

- 2.55. State what the contract or lease is for and the nature of the debtor's interest **Service Agreement**

State the term remaining

IAB SOLUTIONS LLC
233 Northern Blvd
Suite 2
Clarks Summit, PA 18411

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

- 2.56. State what the contract or lease is for and the nature of the debtor's interest **Adage Software Maintenance Agreement**

State the term remaining _____

List the contract number of any government contract _____

Infor (US) Inc.
NW 7418
PO Box 1450
Minneapolis, MN 55485-7418

- 2.57. State what the contract or lease is for and the nature of the debtor's interest **Client Services Contract dated 11/1/2011**

State the term remaining _____

List the contract number of any government contract _____

Integro USA Inc.
dba Integro Insurance Brokers
1 State Street Plaza
9th Floor
New York, NY 10004

- 2.58. State what the contract or lease is for and the nature of the debtor's interest **Collective Bargaining Agreement**

State the term remaining _____

List the contract number of any government contract _____

International Union of Operating Engineers Local 877 AFL-CIO
89 Access Road
Unit 4
Norwood, MA 02062-5233

- 2.59. State what the contract or lease is for and the nature of the debtor's interest **Collective Bargaining Agreement**

State the term remaining _____

List the contract number of any government contract _____

International Union of Operating Engineers Local 877 AFL-CIO
89 Access Road
Unit 4
Norwood, MA 02062-5233

- 2.60. State what the contract or lease is for and the nature of the debtor's interest **Uncertificated Securities Control Agreement dated 10/27/2015**

State the term remaining _____

List the contract number of any government contract _____

ISO New England Inc.
Attn: Mr Robert C. Ludlow
Vice President and Chief Financial Offic
One Sulliva Road
Holyoke, MA 10490-2841

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.61. State what the contract or lease is for and the nature of the debtor's interest

Participation in the New England Power Pool to supply electric power as required

State the term remaining

List the contract number of any government contract

**ISO New England, Inc.
One Sullivan Road
Holyoke, MA 01040-2841**

- 2.62. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated 11/1/2013

State the term remaining

List the contract number of any government contract

**J MIKE ALEXANDER & ASSOC
6400 ATHENS - BOONESBORO RD
LEXINGTON, KY 40509**

- 2.63. State what the contract or lease is for and the nature of the debtor's interest

Software Maintenance Agreement

State the term remaining

List the contract number of any government contract

**Jeff-Net LLC
17304 Preston Road
Suite80
Dallas, TX 75252**

- 2.64. State what the contract or lease is for and the nature of the debtor's interest

Letter Agreement dated June 15, 2017

State the term remaining

List the contract number of any government contract

**Johnson, Brendan
24 Laurel Ave.
Methuen, MA 01844**

- 2.65. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated 8/1/2013

State the term remaining

List the contract number of any government contract

**Kahler Senders, Inc.
ATTN: COMMISSIONS DEPT
4706 - A 20TH STREET EAST
FIFE, WA 98424**

- 2.66. State what the contract or lease is for and the nature of the debtor's interest

Prepetition Management Plan

State the term remaining

List the contract number of any government contract

**Kapferer, Peter
12521 Bane Lane
Lyndonville, NY 14098**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

- 2.67. State what the contract or lease is for and the nature of the debtor's interest

Letter Agreement dated June 15, 2017

State the term remaining

List the contract number of any government contract

**Kredor, Theodor
616 Ashwood Drive
Keller, TX 76248**

- 2.68. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure and Intellectual Property Protections Agreement dated 5/12/2016

State the term remaining

List the contract number of any government contract

**Leaf Brands, LLC
47 Ocean Heights Drive
Newport Coast, CA 92657**

- 2.69. State what the contract or lease is for and the nature of the debtor's interest

Collective Bargaining Agreement

State the term remaining

List the contract number of any government contract

**Lodge 264 of District 15
International Association of Machinists
and Aerospace Workers, AFL-CIO
107 Main Street, Suite A
Northborough, MA 01532**

- 2.70. State what the contract or lease is for and the nature of the debtor's interest

Letter Agreement dated November 9, 2010

State the term remaining

List the contract number of any government contract

**Mahoney, Anne
48 Collincote Street
Stoneham, MA 02180**

- 2.71. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated 8/1/2013

State the term remaining

List the contract number of any government contract

**Mancini, Inc.
PO BOX 57218
SALT LAKE CITY, UT 84157-0218**

- 2.72. State what the contract or lease is for and the nature of the debtor's interest

Prepetition Management Plan**McGee, Michael
110 Beverly Street
Apt. 414
Boston, MA 02114**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

- 2.73. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Mega International, LLC
c/o Michael Reinstein, Registered Agent
421 North Rodeo Drive
Beverly Hills, CA 90210

- 2.74. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Mill City Capital
50 S 6th St #1390
Minneapolis, MN 55402

- 2.75. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated June 9, 2017**

State the term remaining

List the contract number of any government contract _____

Morabito, Diane
29 Lincoln Avenue
Lynnfield, MA 01940

- 2.76. State what the contract or lease is for and the nature of the debtor's interest **Snow Removal Contract 2016 - 2017 Season**

State the term remaining

List the contract number of any government contract _____

MYSTIC LANDSCAPING
104 BOW STREET
PEABODY, MA 01960

- 2.77. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated March 29, 2018**

State the term remaining

List the contract number of any government contract _____

Nasiatka, Robert
40 Armory Street
Wakefield, MA 01880

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.78. State what the contract or lease is for and the nature of the debtor's interest **Prepetition Management Plan**

State the term remaining

List the contract number of any government contract

Neave, Thomas
15 Wedgewood Ct
Newtown, CT 06470

- 2.79. State what the contract or lease is for and the nature of the debtor's interest **Management Agreement dated 9/8/2015**

State the term remaining

List the contract number of any government contract

NECCO HOLDINGS, INC.
135 AMERICAN LEGION HWY.
REVERE, MA 02151

- 2.80. State what the contract or lease is for and the nature of the debtor's interest **Contract Manufacturing and Packaging Agreement dated 7/16/2014**

State the term remaining

List the contract number of any government contract

Nestle USA, Inc.
North American Procurement
800 N. Brand Blvd.
Glendale, CA 91203

- 2.81. State what the contract or lease is for and the nature of the debtor's interest **Mutual Confidentiality, Non-Circumvention and Non-Disclosure Agreement dated 9/24/201**

State the term remaining

List the contract number of any government contract

Nutrifusion, LLC
9 Execultive Park Rd.
Suite A
Hilton Head, SC 29928-4703

- 2.82. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract

O'Brien, Neil
160 Commandants Way
Apt# 202
Chelsea, MA 02150

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.83. State what the contract or lease is for and the nature of the debtor's interest

Agreement for Security Administrator to provide user information to ISO New England Security Administrator: Erik Paulsen, Consultant, 1528 Walnut Street, Philadelphia PA 19102

State the term remaining

List the contract number of any government contract

**Octavia Peterson
ISO New England
One Sullivan Rd.
Holyoke, MA 01040**

2.84. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement

State the term remaining

List the contract number of any government contract

**One Team Advisors
David R. Goldenberg
1117 Sunset Ave.
Jenkintown, PA 19046**

2.85. State what the contract or lease is for and the nature of the debtor's interest

Equipment Lease

State the term remaining

List the contract number of any government contract

**Pitney Bowes Global Financial Services
P.O. Box 371887
Pittsburgh, PA 15250-7887**

2.86. State what the contract or lease is for and the nature of the debtor's interest

Brokers Agreement dated 11/1/2013

State the term remaining

List the contract number of any government contract

**Promark Food Industry Marketing, Inc.
PO BOX 790
CARENCRO, LA 70520**

2.87. State what the contract or lease is for and the nature of the debtor's interest

Non-Disclosure Agreement

State the term remaining

List the contract number of any government contract

**Rich Thompson
315 Columbia St
Bethlehem, PA 18015**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.88. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

**RM Palmer
77 Second Ave
Reading, PA 19607**

- 2.89. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract

**Roberts, Rhonda
173 Springvale Avenue
Everett, MA 02149**

- 2.90. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

**Smarties
1091 Lousons Rd
Union, NJ 07083**

- 2.91. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 12/1/2013**

State the term remaining

List the contract number of any government contract

**Solid Gold Chocolate
1070 East 2nd Street
Brooklyn, NY 11230**

- 2.92. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated November 9, 2010**

State the term remaining

List the contract number of any government contract

**Stokel, James
78 Glenville Ave Apt 1
Allston, MA 02134**

- 2.93. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract

**Sunrise Confections
1800 Northwestern Dr
El Paso, TX 79912**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.94. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**MERCHANDISE AND
TRADEMARK LICENSE
AGREEMENT dated
5/1/2016****Sweet Silly's Jewelry
Heike Schuricht INVENTIONS LAB LTD
145-157 St. John Street
London EC1V4PW
ENGLAND**

2.95. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**APA Agreement of
NECCO equipment by
Hershey dated
December 18, 2017****The Hershey Company
100 Crystal A Drive
Hershey, PA 17033**

2.96. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Non-Disclosure
Agreement****The Topps Company, Inc.
2 Whitehall St
New York, NY 10004**

2.97. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Non-Disclosure
Agreement****Tootsie
7401 S Cicero Ave
Chicago, IL 60629**

2.98. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Service Agreement**TRAFFIC AUDIT & BUREAU
SERVICES INC
PO BOX 6154
Chelsea, MA 02150-0006**

2.99. State what the contract or lease is for and the nature of the debtor's interest

**Non-Disclosure
Agreement****Transom Capital Group
100990 Wilshire Blvd
Suite 440
Los Angeles, CA 90024**

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

- 2.100. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Turnspire Capital Partners
575 Madison Ave #1006
New York, NY 10022

- 2.101. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

List the contract number of any government contract _____

Union Confectionery Machinery Company
600 Mamaroneck Ave #400
Harrison, NY 10528

- 2.102. State what the contract or lease is for and the nature of the debtor's interest **Brokers Agreement dated 8/1/2014**

State the term remaining

List the contract number of any government contract _____

United States Sales Corporation
PO Box 2688
Virginia Beach, VA 23450-2688

- 2.103. State what the contract or lease is for and the nature of the debtor's interest **Contract No. 40044625**

State the term remaining

List the contract number of any government contract _____

United Sugars Corporation
8000 West 78th Street
Suite 300
Edina, MN 55439

- 2.104. State what the contract or lease is for and the nature of the debtor's interest **Contract No. 40044991**

State the term remaining

List the contract number of any government contract _____

United Sugars Corporation
8000 West 78th Street
Suite 300
Edina, MN 55439

Debtor 1 **New England Confectionery Company, Inc.**Case number (if known) **18-11217**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.105. State what the contract or lease is for and the nature of the debtor's interest **Contract No. 40045314**

State the term remaining

United Sugars Corporation
8000 West 78th Street
Suite 300
Edina, MN 55439

List the contract number of any government contract _____

2.106. State what the contract or lease is for and the nature of the debtor's interest **Confidentiality and Non-Disclosure Agreement dated 6/29/2016**

State the term remaining

Unreal Brands, Inc.
200 Barnum Rd.
Bristol, VT 05443

List the contract number of any government contract _____

2.107. State what the contract or lease is for and the nature of the debtor's interest **Non-Disclosure Agreement**

State the term remaining

Yildiz Holding AS
Cesme Cikmazi Sok
No 6/1 Uskudar
Istanbul
TURKEY

List the contract number of any government contract _____

2.108. State what the contract or lease is for and the nature of the debtor's interest **Letter Agreement dated March 26, 2018**

State the term remaining

Zacharewicz, Donna
115 Logan St #1
Gardner, MA 01440

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name **New England Confectionery Company, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) **18-11217**

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1

Street
 City State Zip Code

☐ D
☐ E/F
☐ G

2.2

Street
 City State Zip Code

☐ D
☐ E/F
☐ G

2.3

Street
 City State Zip Code

☐ D
☐ E/F
☐ G

2.4

Street
 City State Zip Code

☐ D
☐ E/F
☐ G